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## BIB DATA SHEET

CONFIRMATION NO. 1060

<b>SERIAL NUMBER</b> 10/805,816	<b>FILING or 371(c) DATE</b> 03/22/2004 <b>RULE</b>	<b>CLASS</b> 600	<b>GROUP ART UNIT</b> 3737	<b>ATTORNEY DOCKET NO.</b> LAR 16406-1-CU	
<b>APPLICANTS</b> William T. Yost, Newport News, VA; Toshiaki Ueno, San Diego, CA; Alan R. Hargens, San Diego, CA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 06/16/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input type="checkbox"/> No Verified and /JOHN FERNANDO RAMIREZ/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> VA	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> NATIONAL AERONAUTICS AND SPACE ADMINISTRATION LANGLEY RESEARCH CENTER MAIL STOP 141 HAMPTON, VA 23681-2199 UNITED STATES					
<b>TITLE</b> ULTRASONIC APPARATUS AND METHOD TO ASSESS COMPARTMENT SYNDROME					
<b>FILING FEE RECEIVED</b> 972	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		